

4 - 5 - 04
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or **Fax** (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 01/05/2004

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Patricia Gamble

(Depositor's name)

Patricia Gamble

(Signature)

April 2, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/081,328	02/20/2002	Susumu Matsui	56232.18 [5042]	9796

TITLE OF INVENTION: OPTICAL DEFLECTION DEVICE AND IMAGE FORMING APPARATUS EQUIPPED THEREWITH

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	04/05/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
PHAM, HAI CHI	2861		347-261000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Konica Corporation

Tokyo Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

Advance Order - # of Copies 2

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 0711850 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) (Date) 04/02/04
Cameron Kerrigan Reg. No. 44,826

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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04/06/2004 LWONDIM2 00000019 071850 10081328

01 FC:1501	1330.00 DA
02 FC:1504	300.00 DA
03 FC:8001	6.00 DA

TRANSMIT THIS FORM WITH FEE(S)

Please type a plus sign (+) inside this box →

Approved for use through 08/30/03. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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APR 02 2004

TRANSMITTAL FORM

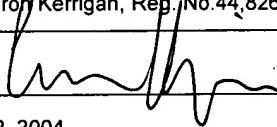
(to be used for all correspondence after initial filing)

		Application Number	10/081,328
		Filing Date	February 20, 2002
		First Named Inventor	Susumu Matsui
		Group Art Unit	2861
		Examiner Name	Hai Chi Pham
Total Number of Pages in This Submission (excluding references)	6	Attorney Docket Number	56232.18

ENCLOSURES (check all that apply)

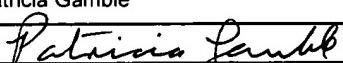
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Fee Address Indication Form	<input checked="" type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Amendment Transmittal Letter (in duplicate)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (month) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and ___ References	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Express Mail Label No.	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) ___	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron Kerrigan, Reg. No. 44,826
Signature	
Date	April 2, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail #EV 337 974 255 US in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: April 2, 2004

Typed or printed name	Patricia Gamble		
Signature		Date	April 2, 2004

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1636.00)

Complete if Known	
Application Number	10/081,328
Filing Date	February 20, 2002
First Named Inventor	Susumu Matsui
Examiner Name	Hai Chi Pham
Art Unit	2861
Attorney Docket No.	56262.18

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Other None
 Order
 Deposit Account:

Deposit Account Number 07-1850

Deposit Account Name Squire, Sanders & Dempsey L.L.P.

The Director is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
-
- Credit any overpayments
-
-
- Charge any additional fee(s) during the pendency of this application
-
-
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	(\\$)	(\\$)
1001	2001	385	Utility filing fee
1002	2002	165	Design filing fee
1003	2003	260	Plant filing fee
1004	2004	375	Reissue filing fee
1005	2005	80	Provisional filing fee

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	-20 **	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims							
Multiple Dependent	0			X	0	=	0

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	(\\$)	(\\$)
1051	130	2051 65	Surcharge - late filing fee or oath
1052	50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053 130	Non-English specification
1812	2,520	1812 2,520	For filing a request for reexamination
1804	920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251	110	2251 55	Extension for reply within first month
1252	420	2252 205	Extension for reply within second month
1253	950	2253 465	Extension for reply within third month
1254	1,480	2254 725	Extension for reply within fourth month
1255	2,010	2255 985	Extension for reply within fifth month
1401	330	2401 160	Notice of Appeal
1402	330	2402 160	Filing a brief in support of an appeal
1403	290	2403 140	Request for oral hearing
1451	1,510	1451 1,510	Petition to institute a public use proceeding
1452	110	2452 55	Petition to revive – unavoidable
1453	1,300	2453 650	Petition to revive – unintentional
1501	1,330	2501 650	Utility issue fee (or reissue)
1502	470	2502 235	Design issue fee
1503	630	2503 315	Plant issue fee
1460	130	1460 130	Petitions to the Commissioner
1807	50	1807 50	Processing fee under 37 CFR 1.17 (q)
1806	180	1806 180	Submission of Information Disclosure Stmt
8021	40	8021 40	Recording each patent assignment per property (times number of properties)
1809	750	2809 375	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801 385	Request for Continued Examination (RCE)
1802	900	1802 900	Request for expedited examination of a design application
Other fee (specify) Publication fee and 2 copies of Letters Patent			306.00

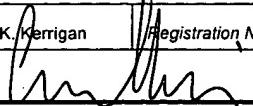
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 1636.00)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Cameron K. Kerrigan	Registration No. Attorney/Agent)	44,826	Telephone	(415) 954-0200
Signature			Date	April 2, 2004	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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